

IHSS Task Grid - Meals and Cleaning

Provider Name: _____ Day of the week: _____ Date: _____ Hours scheduled for day: _____		Month: _____ Total Authorized Hours for Month: _____												
Meals	Meal preparation													
	Help with eating													
	Wash dishes and clean up kitchen													
	Menu planning/shopping list													
	Shopping for food													
Cleaning	Empty trash													
	Clean kitchen surfaces/appliances													
	Throw out spoiled food													
	Make bed													
	Change linen													
	Clutter management/tidy up													
	Dust													
	Clean bathroom													
	Sweep/vacuum													
	Mop													
	Laundry/ironing													

[illegible]